

NORFOLK EDUCATION COMMITTEE

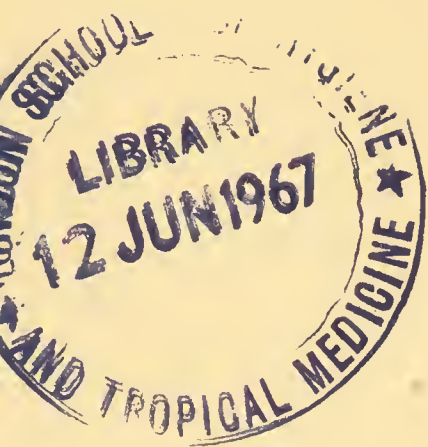
ANNUAL REPORT

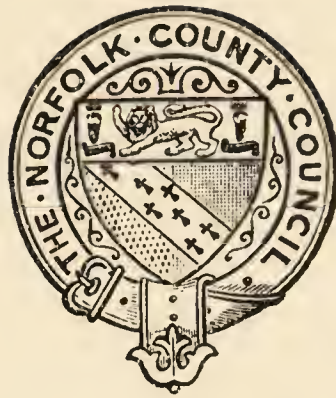
OF THE

School Medical Officer

FOR

1930





NORFOLK EDUCATION COMMITTEE

ANNUAL REPORT
OF THE
School Medical Officer
FOR
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MEDICAL INSPECTION AND ATTENDANCE COMMITTEE.

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PREFACE.

The following Report is the twenty-fourth of the series, and deals with the work of medical inspection and treatment of pupils attending the public elementary and secondary schools of the County during the year 1930.

Routine medical inspection has been carried out at every elementary school in the County, and the majority of schools have been re-visited. Of 13,026 children examined as routines, 23.85 per cent. were found to be suffering from diseases or defects other than dental caries and uncleanness. 51.36 per cent. of these cases are known to have received treatment by the end of the year. It is gratifying to note the increase in the number of children that have received treatment for tonsil and adenoid and visual defects through the schemes of the Education Committee during the year under review. 31,341 children were examined by the School Dental Surgeons, of which number 60.01 per cent. were found to require treatment. Of these, 53.21 per cent. actually received treatment under the scheme. Although it has not been possible for each school in the County to receive a visit from one of the Dental Surgeons, there is an increase in the number of children inspected and the percentage actually treated.

Of the pupils attending secondary schools, 1,174 were examined in the course of routine medical inspection, and 14.39 per cent. found to be suffering from disease or defect, other than dental caries, sufficiently serious to require treatment. Of these, 47.72 per cent. are known to have received treatment by the end of the year. 1,044 pupils were examined by the School Dental Surgeons. 56.41 per cent. were found to need dental treatment, 65.53 per cent. of whom actually received treatment.

In conclusion, I wish again to place on record my appreciation of the whole-hearted co-operation given by the professional, nursing and clerical staff.

T. RUDDOCK-WEST, M.D., B.S., D.P.H.

School Medical Officer.

County Public Health Department,
29, Thorpe Road,
Norwich,
March, 1931.

ANNUAL REPORT

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1930.

STAFF AND DUTIES.

The School Medical Officer is also County Medical Officer of Health. The Senior Assistant Medical Officer, who also acts as Deputy County Medical Officer, in addition to routine administrative and supervisory work in connection with school medical services, is a Certifying Officer in respect of mentally and physically defective children. Four Assistant Medical Officers devote their services to school medical work, one also acting as Medical Officer to an Infant Welfare Centre.

Six Dental Surgeons are employed, the services of one being shared with an adjoining Authority.

The nine School Nurses also act as Attendance Officers and Infant Life Protection Visitors.

In addition, the services of the part-time Orthopædic Surgeon and the Orthopædic Nurse, are utilised for examination and treatment of Education cases on the Orthopædic Register.

In connection with the treatment of visual defects the part-time services of five Ophthalmic Surgeons and eleven general practitioners with special experience in refraction work are utilised.

There is also a panel comprising fifty-five medical practitioners who have been approved for performing tonsil and adenoid operations under the Committee's Treatment Scheme.

Every possible effort is made to secure fullest co-operation with the general practitioners in the County.

The clerical work of the service is performed by the staff of the Public Health Department.

Further particulars concerning the professional and clerical staff will be found in my Annual Report as County M.O.H.

ELEMENTARY SCHOOLS.

(a) **Numbers and Attendances.** At the end of the year there were in the education area of the County 488 public elementary schools, having 539 departments; 218 were provided and 270 non-provided schools.

On December 31st, 1930, there were 43,673 children on the registers, 2,215 being under the "legal" age of five years. The average attendance during the school year (*i.e.*, year ending 31st March, 1930) was 39,827.

(b) **School Hygiene** (i.) The duty of the School Medical Officer was outlined in the Report for 1929. It is also the duty of the District Sanitary Authorities to ensure due hygienic conditions in the schools in their area.

The Assistant Medical Officers at the time of their visits to the schools report on the hygienic conditions and such matters that warrant attention are referred to the Education Committee. During the year 441 defects affecting 174 departments were referred:—

Nature of Defect.	Number reported.
Desks—unsuitable and bad type	86
Lighting—inadequate	31
Heating—inadequate	47
faulty	4
Ventilation—inadequate	40
Closets and urinals:—	
Insufficient accommodation	6
Constructional defects, faulty drainage ...	31
Unsatisfactory cleansing	13
Lavatories:—	
Inadequate accommodation	14
Insufficient supply of towels	6
Repairs and improvements required	6
Cloakroom accommodation inadequate	15
School buildings—structural defects	13
Water supply:—	
Unsuitable arrangements	11
No drinking utensils	2
Playground surface:—	
Repair	33
Drainage	9
Untidy	1
Internal decoration needed	14
Defective floors	27
Uncovered ashpits	1
General cleaning unsatisfactory	4
General drainage system	10
Provision of partitions	2
Disposal of refuse	1
Provision of cycle shed	4
Removal of gallery steps	2
Provision of dust-bin	1
Additional accommodation required	4
Miscellaneous	3

I am indebted to the Secretary for Education for the following particulars as to structural alterations, improvements, renovations, etc., carried out during the financial year ending 31st March, 1931:—

		Provided Schools.	Non-Provided Schools.
Structural alterations	... ..	6	5
Improvements—Drainage	... ..	11	—
Ventilation and lighting ..	... ..	9	—
Heating	... ..	9	—
Playgrounds—Tarmac	... ..	13	—
Renovations	... ..	21	24

(ii.) **Lighting and Heating.** Reference to the number of defects referred for attention during the year will show that much remains to be done in this connection.

(iii.) **Drinking Vessels.** I have nothing further to add to the remarks made in last year's Report.

(iv.) **Drinking Water.** Five samples from school wells were examined in the County Laboratory during the year, three proving satisfactory on analysis, and two unsatisfactory.

(v.) **Playgrounds.** Attention was drawn in my Report for 1929 to the unsatisfactory condition of the surfaces of many of the playgrounds. During the year reference was made to 42 schools at which repair or drainage of playground surfaces was necessary and while in some instances the defect has been dealt with, this is a matter needing consideration.

(vi.) **Desks.** The gradual replacement of obsolete desks continues.

MEDICAL INSPECTION.

The following groups of children were inspected:—

- (i.) Entrants, children entering school for the first time.
- (ii.) Intermediates, children eight years of age.
- (iii.) Leavers, (a) Children 12 years of age, (b) Children due to leave school during the year and not inspected while twelve years of age.
- (iv.) Children missed in above categories.
- (v.) Specials, children of various ages concerning whose conditions teachers, or parents, required advice.

The number of children examined in the various age groups is set out in Table I., page 34. It will be seen that 13,026 children underwent routine medical inspection, a further 3,307 being seen as "Special" cases. In addition, 18,586 found defective at previous medical inspections were re-examined, making a total of 34,919 examined during the year. All routine groups show a decrease, which may to a large extent be accounted for by the prevalence of Measles during the whole of the year under review.

A routine inspection was held in every school. There was a large increase in the number of subsequent visits to re-examine defective cases, viz., from 45 departments in 1929 to 269, while in addition 25 of the latter departments received a third visit.

The scope of inspection has been that outlined in the schedule of the Board.

FINDINGS OF MEDICAL INSPECTION.

(see Table II. page 35).

(a) MALNUTRITION. As a result of routine Inspection, 457 children were referred for treatment on account of their nutrition being below normal. The Assistant Medical Officers classified these cases as follows :—

(i.)	Nutrition subnormal	...	...	389
(ii.)	Nutrition poor	...	...	65
(iii.)	Definite malnutrition	...	...	3

Of the group (iii.) cases, one child has been for some years under supervision by the Tuberculosis Officer, and the remaining two have been kept under observation.

This matter was dealt with in some detail in my Report for 1929.

(b) UNCLEANINESS. Out of 13,026 routine children inspected, 207 were noted for treatment for uncleanliness of head and 71 uncleanliness of body.

Reference to Page 11 will show that there is a considerable improvement in this respect.

(c) SKIN DISEASES. These figures remain comparatively small and practically stationary.

(d) EYE AFFECTIONS. 233 children were referred for treatment for *blepharitis* as a result of routine inspection, 22 for *conjunctivitis* and 1 for *corneal opacities*.

(e) DEFECTIVE VISION. 398 children under routine inspection were referred for treatment and 731 noted for observation. 119 children were also recommended treatment as a result of special inspections.

(f) EAR AFFECTIONS. The numbers referred for treatment amongst the routines were *defective hearing* 51, *otitis media* 38, and *other ear diseases* 40.

The services of a Consulting Aural Surgeon will be available in connection with any difficult cases during the coming year.

(g) AFFECTIONS OF THE NOSE AND THROAT. 476 "routines" were referred for treatment for *enlarged tonsils*, 69 for *adenoids* and 775 for *tonsils and adenoids*. These figures show an increase. From the analysis of findings of medical inspection during the past five years given by the Chief Medical Officer of the Board in his Report for 1929 (page 9) it would appear that the figures for the country as a whole are showing an increase.

(h) HEART AND LUNG AFFECTIONS. (Not including Tuberculosis). 34 cases are recorded as requiring treatment for *bronchitis* and 62 for *other non-tuberculous diseases*.

(i) TUBERCULOSIS. 5 "routines" were referred for treatment for *pulmonary tuberculosis*, 31 for *tuberculous glands* and 7 for *other forms of tuberculosis*.

(j) AFFECTIONS OF THE NERVOUS SYSTEM. 13 children were noted for treatment and 51 for observation.

(k) DEFORMITIES. 17 cases of *rickets*, 10 of *spinal curvature* and 54 *other forms* were marked for treatment during routine inspections. These figures all show a decrease although the numbers noted for observation (209) are larger than those for 1929 (127).

INFECTIOUS DISEASES.

The joint memorandum of the Ministry of Health and Board of Education of 1925 has again been followed.

22 visits have been paid to schools by Medical Officers in connection with outbreaks of infectious diseases. Full co-operation has been maintained with the District Medical Officers of Health, and valuable assistance has been given, especially in instances where a visit by a member of the medical staff proved impracticable. The services of the School Nurses have again been utilised; 156 visits having been paid in this connection. Wherever possible a visit by a medical or nursing member of the staff has been arranged.

Measles has been prevalent during the year throughout the County generally and has been responsible for more than one-half of the School Closures and nearly one-third of the individual exclusions issued.

Owing to a case of small-pox having been notified in one of the Districts, after consultation with the District Medical Officer it was deemed advisable to close the schools in the town for the five sessions prior to the commencement of the Christmas Holidays.

School Closures during 1930.

Under Article 45 (B), on advice of School Medical Officer	65
Under Article 57 by Local Sanitary Authority	Nil
	<hr/>
	65
	<hr/>

The following Table gives the diseases responsible for closure, together with the number of school days lost through such action :—

Diseases.	No. of Closures.	No. of School-days Closed.
Coughs and Colds	11	58
Diphtheria ...	5	25
Influenza ...	6	45
Measles ...	37	344
Scarlet Fever ...	3	23
Small Pox ...	3	7½
	<hr/>	<hr/>
	65	502½
	<hr/>	<hr/>

In all cases where closure was advised, the Head Teachers were requested to use their influence with the parents with a view to the children being kept apart as much as possible and where the closure was for an extended period to approach the local authorities as to closure of the Sunday Schools in the neighbourhood.

Exclusions.

13,002 children were temporarily excluded or re-excluded under Article 53 (B) on account of the following infectious diseases :—

Chicken Pox	...	...	1690	Measles—English	...	4356
Coughs and Colds	...	...	2105	Mumps	...	2156
Diphtheria	...	...	165	Scarlet Fever	...	413
Influenza	...	...	290	Sore Throats	...	428
Measles—German	...	...	463	Whooping Cough	...	936

94 complete classes were also excluded under this Article during the year.

Rule 23 of Schedule IV. of the Code—Paragraph 2 (a).

Under these regulations, 367 certificates were issued by the School Medical Officer where the attendance of a school fell below 60 per cent., and was reasonably attributed to the prevalence of epidemic disease in the district. The responsible diseases were :—

Chicken Pox	...	...	9	Measles	...	...	213
Coughs, Cold, etc.	...	...	22	Mumps	...	...	34
Diphtheria	...	...	18	Scarlet Fever	...	...	3
Influenza	...	...	3	Whooping Cough	...	...	65

FOLLOWING UP.

No alteration has been made in the system of recording defective children in need of treatment in the Medical Log Book of the School. The cases in the first instance are followed up by the members of the Local Care Committees. In the event of no action being taken by the parents as a result of the efforts of the Care Committees, the cases receive the attention of the medical or nursing members of the staff.

During the year under review it has been possible to devote more attention to outstanding cases and this has some bearing on the increase of treatment obtained under the Committee's Schemes.

WORK OF THE NURSES.

(a) Minor Ailments.

(i.) **TREATED AT SCHOOL CLINICS.** The six equipped Clinics have been attended weekly by the Nurses for the respective districts, an Assistant Medical Officer being in attendance monthly. A summary of the work performed is given on page 12, under Medical Treatment.

(ii.) **TREATED AT SCHOOLS OR AT HOME.** Children at schools not served by the Clinic Huts have again been followed up by the Nurses at the schools or in their own homes, and, where necessary, treatment has been carried out. The following cases were dealt with during the year :—

Impetigo	...	...	741	Minor Injuries	...	...	429
Scabies	...	...	27	Ear Disease	...	...	104
Ringworm—Scalp	...	...	188	Eye Disease	...	...	643
Ringworm—Body	...	...	39	Miscellaneous	...	...	202
Other Skin Diseases	...	...	73				

In view of nine cases of Ringworm of the Scalp occurring at a school not covered by a Minor Ailments Clinic, arrangements were made for the Nurse for the District to visit weekly and give active treatment on the school premises. 20 visits were made, and at the end of the year only two of the cases remained uncured.

(b) **Surveys of Children for Uncleanliness.**

Number of visits to schools	...	...	...	...	...	...	4077*
Average number of visits made to each school visited	...	...	...	...	...	...	7.54
Total number of children examined	...	...	...	...	...	...	184,653
Number of individual children found unclean (<i>i.e.</i> vermin or nits)	...	...	...	...	...	...	4,408
Number of children excluded at the Nurses' visits	...	...	...	...	...	...	365
Number of Special Warning Letters <i>re</i> Nits sent to parents	...	...	...	...	...	...	23
Number of Letters sent on first exclusion	...	...	...	...	...	...	106
Number of "Final Warning" Letters sent to parents	...	...	...	...	...	...	55
Number of Homes visited	...	...	...	...	...	...	490
Result of "following up"—							
Clean	...	...	...	...	...	...	1,661
Improved	...	...	...	...	...	...	2,442
Unsatisfactory	...	...	...	...	...	...	305

*Includes 2,054 complete surveys of all children in school.

In 142 schools, on 325 occasions, all the children were found quite clean.

In the last Report, attention was drawn to the large increase in the number of "clean" schools (*i.e.*, all children free from nits as well as from live vermin). There is a further increase of 25 schools during the year under review, bringing the total to 142, or more than one quarter of the schools in the County. In addition there is a fall in the number of individual children found unclean (from 5,313 in 1929 to 4,405), although the total number of children examined by the Nurses shows an increase of 13,354.

The position is one for satisfaction and reflects greatly on the work of the Nurses, the valuable assistance given by the Teachers, and also on the present-day attitude of the majority of the parents.

VERMINOUS PROSECUTIONS. 13 prosecutions for absence occasioned by uncleanliness were taken under the Attendance Bye-laws. Fines were inflicted in all cases amounting to £6. 1s. 6d., viz :—

20/-	14/-	10/-	7/6	5/-
—	—	—	—	—
2	1	3	1	6

(c) **Miscellaneous Work.**

As has been mentioned, the services of the Nurses have been more fully utilised during the past year in connection with the outbreak of Infectious Diseases and the "following up" of Treatment.

MEDICAL TREATMENT.

(a) Under Education Committee's Scheme.

(1) Minor Ailments treated at School Clinics (see page 10).

DISEASES.	RESULT OF TREATMENT.				Total attendances at clinic
	No. Individual children treated.	No. cured.	No. still to attend.	No. left or refused treatment.	
Impetigo	501	495	52	14	2710
Scabies	3	3	—	—	15
Ringworm—Scalp	10	1	8	1	181
Ringworm—Body	7	4	1	2	18
Other Skin Diseases... ..	181	152	27	2	1235
Minor Injuries	558	507	45	6	2026
Discharging Ears	41	17	19	5	653
Other Ear Diseases	28	26	—	2	102
Blepharitis	68	46	18	4	851
Conjunctivitis	21	18	2	1	154
Other Eye Diseases	13	12	1	—	54
Enlarged Glands	40	24	16	—	543
Verminous	23	10	13	—	371
Miscellaneous	93	71	15	7	565
	<hr/> 1647	<hr/> 1386	<hr/> 217	<hr/> 44*	<hr/> 9478

*Includes two refusals.

(2) Defective Vision—Refraction Work.

(a) Vouchers issued on :—

Ophthalmic Specialists ...	185	
Approved General Practitioners	72	257

(b) by whole-time Assistant Medical Officers

787

1044

Of the 257 vouchers issued on Specialists and approved General Practitioners, 12 were not utilised by the end of the year. The remaining 245 cases examined, resulted as follows :—

Glasses prescribed and obtained	166
Glasses not necessary	59
Glasses prescribed but not obtained by end of year ...	18
Referred by General Practitioners to Specialists ...	2

219 Refraction Clinics were held by the Assistant Medical Officers at 123 centres. Of the 787 children examined by retinoscopy, 653 were found to require glasses, 13 were referred to the Ophthalmic Specialists, leaving 121 cases in which provision of glasses was not indicated. Glasses were obtained by the end of the year in 606 instances, leaving 47 cases outstanding.

(3) Operations for Tonsils and Adenoids.

Vouchers issued on :—

General Practitioners	...	...	375
Hospitals	...	...	574
			<hr/>
			949
			<hr/>

of this number, 188 were outstanding at the end of the year.

981 children are known to have received operative treatment during 1930, of which number 800 were performed through the Authority's Treatment Scheme.

Arrangements are in force with the Jenny Lind Hospital, Norwich, the West Norfolk and Lynn Hospital, King's Lynn, the North Cambridgeshire Hospital, Wisbech, and the North Walsham Cottage Hospital.

In the case of vouchers issued on general practitioners the operations are in many instances performed by local arrangements at Cottage Hospitals or Nursing Homes, while other practitioners perform operations at their own Surgeries, and arrange for a Nurse to be in attendance. Of such vouchers utilised during the year, 57.30 per cent. of the operations were carried out in Cottage Hospitals; 23.70 per cent. at the Doctors' Surgeries; 13.25 per cent. at the homes of the children and 5.75 per cent. at Nursing Homes.

The ideal scheme for treatment of tonsil and adenoid defects provides for at least over-night retention and while in a rural district this is often difficult to arrange, it is to be hoped that in time the difficulties will be overcome.

(4) **Tuberculosis.** All cases of definite or suspected tuberculous disease are, after reference to the general practitioner concerned, referred to the Tuberculosis Officers, and any necessary treatment provided under the County Council's Tuberculosis Scheme. In cases of tubercle of the bones and joints, the services of the Orthopædic Surgeon are available.

Details of the number of children under institutional treatment at the end of the year are given in Table III., page 38.

(b) Not under Education Committee's Scheme.

The figures given in the following Table relate to defects found as a result of inspection which are known to have been treated during the year apart from any scheme of the Education Committee. This information has been obtained from reports of the Local Care Committees; from reports of the Assistant Medical Officers after re-examination visits and in a few instances where no active Care Committee is in existence from the reports of the School Nurses :—

DEFECT.	NUMBER OF CHILDREN TREATED.					
	Referred previous to 1930.		Referred in 1930			Total.
Malnutrition (including Debility, Underweight, etc.)	...	49	...	77	...	126
Ringworm of Body	...	—	...	6	...	6
Other Skin Diseases	...	11	...	17	...	28
Blepharitis	...	39	...	32	...	71
Conjunctivitis	...	5	...	11	...	16
Other Eye Diseases	...	4	...	9	...	13
Squint (operation)	...	2	...	—	...	2
Defective Hearing	...	6	...	5	...	11
Otitis Media	...	23	...	20	...	43
Other Ear Diseases	...	9	...	11	...	20
Defective Speech	...	4	...	—	...	4
Enlarged Glands (Non. Tb.)	...	50	...	49	...	99
Heart—Organic	...	1	...	5	...	6
Heart—Functional	...	2	...	4	...	6
Anæmia	...	32	...	40	...	72
Bronchitis	...	9	...	16	...	25
Lungs, other (Non. Tb.)	...	11	...	10	...	21
Epilepsy	...	—	...	3	...	3
Nervous, other	...	3	...	5	...	8
Rickets	...	4	...	—	...	4
Spinal Curvature	...	3	...	4	...	7
Other Deformities	...	6	...	8	...	14
Other Defects and Diseases	...	62	...	79	...	141
Total		335		411		746

DENTAL TREATMENT.

Treatment has continued to be carried out in the six fully-equipped horse-drawn vans and whenever possible urgent cases have been seen as specials.

All children in attendance are inspected on the occasion of the visits of the Dental Surgeons.

As is shown in Table IV., Group IV., page 41, 31,341 children were inspected during the year, 2,194 of this number being 5 years of age or under. The percentage of refusals for the year is 46.79, which is a decrease on the figure for 1929, and is approximately the same as that during the two preceding years. At a few schools, 100 per cent. acceptance of treatment has been received. The assistance given by Care Committees and Teachers has a large bearing on such a result.

Lectures by the Dental Surgeons are given to the children on the care of their teeth whenever opportunity permits.

Since the decision of the Committee in September 1929, to supply tooth-brushes to children at cost price, 1,624 brushes have been issued to approximately 130 schools.

ORTHOPÆDIC TREATMENT.

The Scheme, approved by the Board of Education and the Ministry of Health in 1927 for the treatment of children resident in the Administrative County suffering from crippling defects, has not been revised, altered or added to during the current year to any considerable extent and no outstanding difficulty has been experienced in the administration of the Scheme. The following particulars of course refer only to the treatment of cases for which the Education Committee is responsible, information respecting the treatment of Maternity and Child Welfare and Tuberculous cases appearing in my report as County Medical Officer.

(1) Ascertainment.

As is to be expected, the majority of cases notified for examination and/or treatment are the outcome of examinations by the Assistant Medical Officers. 132 new cases have been examined either by the Orthopædic Surgeon or the Orthopædic Nurse and 100 of these remained on the Register at the end of the year. The other 32 cases have not been retained owing to the following reasons:—

Left School—no further treatment	...	...	1
Treatment refused	...	...	8
No treatment needed or advised	...	...	18
Cured	...	...	4
Having treatment privately	...	...	1
			<hr/> 32 <hr/>

14 cases have been transferred from the Maternity and Child Welfare Register to the Education Register, and one from the Tuberculosis Register. Thus 115 cases have been added during the year.

(2) Clinics held by the Orthopædic Surgeon.

Inspection Clinics have been held as shown below :—

Centre.	No. of Clinic Sessions.	Cases examined.		TOTAL.
		New	Re-examina- tions.	
Norwich	17	38	45	83
King's Lynn	6	9	22	31
TOTAL	23	47	67	114

The number of cases examined shows an increase on the previous year when 101 children were examined at 19 clinic sessions.

(3) Institutional Treatment.

The in-patient treatment provided at General Hospitals and Certified Hospital Schools is shown in the following table, the number of cases awaiting admission at the end of the year being also indicated :—

Institution.	Receiving treatment 1.1.30.	Admitted during year.	Discharged during year.	Receiving treatment 31.12.30.	Awaiting admission 31.12.30.
Jenny Lind Hospital, Norwich	1	11	12	—	2
St. Nicholas' and St. Martins' Orthopædic Hospital, Pyrford, Surrey... ..	2	5	1	6	—
Royal National Orthopæ- dic Hospital, London	—	4	4	—	2
Heatherwood Hospital, Ascot, Berkshire ...	—	1	—	1	—
TOTALS	3	21	17	7	4

One of the cases shown as having been admitted to Pyrford during the year was originally diagnosed as tubercle of the knee joint. After admission and investigation the case was found to be one of osteomyelitis of the femur and financial responsibility was assumed by the Education Committee.

No difficulty has been experienced in securing the early admission of patients to the Jenny Lind Hospital. Vacancies at Pyrford have usually been available within a month of application being made, whilst admissions to the Royal National Orthopædic Hospital, although not so readily secured, have not been unduly deferred.

The treatment of the 17 cases discharged during the year has been analysed as follows:—

Institution.	Deformity.	No. of cases treated.	Treatment.	Result of treatment.
Jenny Lind Hospital, Norwich. ...	Torticollis ...	8	Lengthening of sterno-mastoid muscle 7	Very much improved 5 Improved 2
			Division of scalenus anticus 1	Very little improvement ... 1
	Spastic paraplegia-contraction of tendo achillis ...	1	Elongation of tendo achillis ...	Good result of treatment.
	Dorsal kyphosis ...	1	Massage, rest and exercises ...	Much improved.
	Flexional deformity of big toe ...	1	Amputation of distal phalanx ...	Good result.
	Contracted scar at back of knee preventing full extension of leg ...	1	Excision of sinus and scar tissue.	Full extension of leg.
St. Nicholas' & St. Martins' Orthopædic Hospital, Pyrford, Surrey.	Scoliosis ...	1	Head traction, massage and exercises ...	Much improved.
Royal National Orthopædic Hospital, London ...	Flexional deformity of left hip ...	1	Osteotomy of femur ...	Much improved.
	Double Pes Cavus ...	1	Steindlers operation on both feet.	Right foot:— deformity corrected. Left foot:— improved.
	Paralysis of left arm ...	1	Arthrodesis of shoulder ...	Good result.
	Old anterior poliomyelitis affecting right leg ...	1	Steindlers muscle slide operation ...	Good result.

On discharge from Hospital, all cases are visited by the Orthopædic Nurse, and care is taken to ensure that after-care recommendations are carried out.

(4) Supply of Surgical Apparatus.

Vouchers have been issued authorising the supply, alteration and repair of appliances as follows :—

Surgical boots	...	...	...	29
Surgical boots and instruments	...	...	...	26
Spinal supports	...	...	...	7
Calipers	...	...	...	4
Cork elevators	...	...	...	3
Abdominal belts	...	...	...	1
T. straps	...	...	...	1
Arm and hand splints	...	...	...	1
Crutches	...	...	...	1
Caliper tubes	...	...	...	1
Club foot shoes	...	...	...	2
Alterations to boots	...	...	...	7
Instruments and alteration to boots	...	...	...	2
Repairs to boots and instruments	...	...	...	1
Repairs to instruments	...	...	...	7
				<hr/>
				93

Of the cases on the Register at the end of the year, surgical apparatus was being worn by the following :—

Surgical boots	...	...	...	...	37
Ordinary boots wedged or otherwise altered	...	...	...	...	44
Surgical boots and instruments	...	...	...	...	60
Spinal supports	...	...	...	...	10
Artificial legs	...	...	...	...	2
Artificial hand	...	...	...	...	1
Abdominal belt	...	...	...	...	1
Hand splint	...	...	...	...	1
					<hr/>
					156

(5) Supply of special chairs and tables.

Three special chairs and tables have been supplied for children who have been unable to make use of the ordinary school furniture.

(6) Services of Orthopædic Nurse.

The success or otherwise of the treatment provided under the scheme depends to a large extent on the work of the Orthopædic Nurse. In the first year of the scheme, before an Orthopædic Nurse was appointed, children discharged from Hospital returned, in many cases, to homes where after-treatment could not be effectively given or supervised, and these cases were lost sight of by the Surgeon. Now, however, such cases are visited by the Nurse immediately after discharge and parents are advised as to the after-care necessary. If any difficulty arises, the children are re-examined by the Surgeon for his further advice. Surgical apparatus is frequently in need of adjustment, repair and replacement and the Orthopædic Nurse, by reporting these matters at an early date, ensures that they are expeditiously dealt with at the least inconvenience to the children concerned. In this way treatment is not hindered by the non-

wearing or bad repair of any apparatus supplied to correct or prevent the increase of deformities. The demonstration and supervision of remedial exercises is also an important factor, particularly so in the treatment of the less severe crippling defects which may not need operative treatment or the provision of surgical appliances.

Altogether, 1115 home and school visits have been made by the Nurse during the period under review.

(7) **Cases discontinued.**

53 children on the Register at the commencement of the year have been crossed off for the undermentioned reasons:—

Left school—no further treatment	...	21
Treatment refused	... ..	2
Age limit reached	... ..	3
Further treatment not needed or not advised	... ..	4
Cured	... ..	21
Removed from County	... ..	2
		<hr/> 53

(8) **Cases on Register.**

At the end of the year there were 386 current Education cases on the Register as compared with 324 at the end of 1929 and 273 at the end of 1928. The former figure is made up as follows:—

Flat feet and valgus ankles	... ..	73
Claw feet	... ..	15
Hammer toe	... ..	4
Hallux valgus	... ..	3
Metatarsal varus	... ..	2
Deformed toes	... ..	3
Knock knees	... ..	25
Bow legs	... ..	5
Congenital deformities:—		
Hip	... ..	18
Spine	... ..	5
Feet	... ..	19
Hand	... ..	3
Spastic paralysis	... ..	37
Infantile paralysis	... ..	52
Muscular dystrophy	... ..	3
Spina bifida	... ..	1
Erb's paralysis	... ..	4
Ischæmic palsy	... ..	2
Wry neck	... ..	22
Spinal deformities (not congenital)	... ..	35
Hip diseases (not congenital)	... ..	12
Rickets	... ..	4
Chest deformities	... ..	3
Deformity of thumb or fingers	... ..	6
Osteomyelitis	... ..	6
Amputations	... ..	3
Miscellaneous	... ..	21
		<hr/> 386

208 of the 386 cases have been examined at least once by the Orthopædic Surgeon and 56 have received institutional treatment under the Scheme.

(9) Vocational Training.

In the present days of widespread unemployment with so many able-bodied men and women on the labour market, the opportunities that crippled children have of obtaining work on leaving school appear to be extremely limited, as employers are less likely to engage physically defectives whilst those in possession of full health and strength are available. The agricultural industry of Norfolk absorbs 50 per cent. of the boys leaving our Elementary Schools and whilst a great number of children who have been treated under the Orthopædic Scheme do go to work on the land on leaving School, yet there are a few whose physical frames are not equal to the demands made by arduous agricultural work. Some of these may find employment elsewhere but even then a residue is left and these children will become a burden upon their parents and eventually upon the County Ratepayers unless special training is forthcoming which will enable them later on to follow an occupation in which their disablement will not prove so disadvantageous. These remarks apply also to the girls, though probably to a smaller extent, as girls can find indoor employment more easily. There are however cases where special training would be a great advantage.

There appears to be a definite need for the framing of a scheme whereby children suffering from crippling defects which will be a serious handicap to them in obtaining and keeping suitable employment, shall have the opportunity of being sent to a Training College for special training in an occupation suitable for their condition.

PHYSICAL TRAINING.

Mr. J. T. Wilkinson, the Organiser of Physical Training, reports as follows for the year ended 31st December, 1930:—

(1) General.

The progress in Physical Education in all types of schools is considered good. This satisfactory advance is most noticeable in the Elementary Schools. The Teachers in Norfolk have succeeded in stimulating in the boys and girls a marked interest in Physical Exercises, Games, Dancing, etc., which is worthy of commendation.

It should be mentioned that a change in attitude towards the subject is evident—an understanding of modern method; this is due largely to the attendance at classes held by the Committee at different Centres in the County. Three classes are held yearly. The number of Teachers attending these central classes has increased.

The improvement is all the more remarkable in some schools, when consideration is given to the adverse conditions under which physical training and other activities have to be taken. There is much to be done in all branches of the work, as there must always be, in the County as a whole. Swimming instruction awaits development, and the Playing Field question is far from complete.

PHYSICAL EXERCISES. The lessons are more balanced and on the whole much more interesting and enjoyable. A demand on alertness, activity, speed and skill has been made, especially in the "B" standard schools referred to in reports to the Secretary.

The Syllabus 1919, Rural School Book 1924 (Supplement for older girls) are followed closely, and lessons are better and more carefully carried out.

In some schools greater attention has been given to the correction of individual faults of position and movement, as upon this largely depends not only the general smartness and "finish" of the class work, but also the ultimate value of the exercises to the children themselves.

CLOTHING. The help of the parents is greatly appreciated. The number of girls schools adopting the recognised gymnastic costume is steadily increasing, whilst the wearing of proper shoes by the children is noticeable in many schools. Boys in many cases are still heavily over-clothed.

The statement that children get cold is a confession of the inadequacy of activity in the lesson itself.

It has been urged that attendance figures are affected by children developing colds through removing clothing during physical training lessons but this contention is not upheld by the facts, as many schools which lead in the attendance lists are those in which the physical training has reached a high standard of efficiency, and where outdoor lessons are most regular.

The teacher, by reason of linking up the items of his programme in such a way as to produce a continuous flow of movement, should produce increased circulation and warmth, rather than the reverse, thus making the wearing of several layers of clothing not only unnecessary, but decidedly uncomfortable even in cold weather.

PLAYTIME. Here, in some cases, children, through lack of knowledge, in play often are noticed standing about, and it has been found that the physical training lesson that morning was taken indoors. This certainly does not suit the conditions. See circular—Winter months, April, 1930.

GAMES. All the children should be kept moving. Games should be avoided in which some children are stationary for any length of time. Players should not be allowed to stand out and do nothing if they miss or are touched.

The question of weather conditions is a subject for the play leader carefully to consider, and one in which he should be sympathetic but not unduly sensitive; for it has been found by experience that if the children enjoy themselves, no complaints arise from them or their parents about catching a cold.

POSTURE. The following exercises are suitable for raising the standard of posture and should be included in the Physical Training lesson :—

- (a) Massive trunk exercises.
- (b) Hamstring stretchings.
- (c) A good free march and run.

After these exercises in experimental schools, where they have been tried from Standard II. up, a better knowledge of "standing position" was noticed. The lesson had not lost any effect. There was a wonderful improvement in suppleness, and movements in marching were distinctly good. It was also possible to isolate movement to a desired degree. (See Circulars on Posture, 1930, issued at Teachers' Classes, with lists of exercises.)

There is a tendency still in some cases to restrict unduly the scope of the training when weather conditions are unfavourable for outdoor lessons. With children during winter months, there is an urgent need, in spite of the inclemency of the weather, and poor conditions, for physical training lessons to continue in steady progression. Schools where regular training has taken place are very outstanding, and the standard of work is much in advance of those where the training is not regular. The Circular "Winter Months" prepared April, 1930, has been found useful in the taking of lessons indoors.

Except in wet weather an attempt is made to take the lessons in the playground, the exercises are of greater value when taken in the open air it is understood.

General activity has improved—this is due to the extra allowance for games apparatus. Schools have been supplied up to date.

There are excellent examples of "Team Work" in many of the Senior Schools, particularly girls departments. In general, the lessons are usually taken with a vigour and swing which demand the right type of effort from the children.

CENTRAL SCHOOL. The standard of work has reached a good level, the accommodation is receiving attention and the Playing Field is used to full advantage.

The special teacher of the girls has attended teachers' classes and the supplement for older girls has been included as a syllabus of training. The boys are taught apart by a special man assistant.

Special visits have been made this year since attendance at the Organisers' Conference at Eastbourne.

The Central School is in close co-operation with the Pupil Teachers' Centre for Physical Training, and when visits are made to this Centre, further help is possible for the School. This advantage is used to the full.

A Syllabus of Training has been prepared to suit special needs, and includes :—

- (i.) Set of exercises.
- (ii.) Effect of exercises.
- (iii.) Progression.
- (iv.) Breaks.
- (v.) Team work.
- (vi.) Games.
- (vii.) Dancing.

Time devoted to training :—

- 2 periods of 40 minutes—Physical Exercises.
- 1 period of 40 minutes—Athletics or Dancing.
- 1 period of 60 minutes—Games.

Gymnastic Apparatus has not been supplied as yet. The physical training room is in course of erection.

PLAYING FIELD. A special planning of the field has been made as suggested by the Board of Education Playing Fields Pamphlet, 1930, which proved of great value on its full details of modern training.

The school possesses a good set of Games Equipment.

It is most desirable that no Senior School, however moderate in size, should have less than 2—3 acres. With less space it is extremely difficult to provide adequately for a whole form to play simultaneously.

Every child over 11 spends 1 hour per week on the Playing Field.

(2) **Schools Visited.**

1928	...	351	Schools.	...	1369	demonstrations.
1929	...	399	„	...	1465	„
1930	...	372	„	...	1478	„

Demonstration lessons and talks to the teachers are given when these visits are made and circulars have been issued this year.

(3) **Circulars issued during 1930.**

- (i.) Games. Senior type—Size of pitches.
- (ii.) Breaks. (a) Dispersal type.
(b) Little or no change of position.
(c) Essential.
- (iii.) Physical training hints.
- (iv.) Examples of Classroom lessons.
(a) Senior.
(b) Middle.
(c) Junior.
(d) Infant.
- (v.) Games.—Minor and Major.
- (vi.) Infant lessons.
- (vii.) General Activity.
- (viii.) Playing Field Planning.
- (ix.) Posture.
- (x.) Play theory.
- (xi.) Special conditions.
- (xii.) Winter months.

(4) Teachers' Classes.

Teachers' Classes have been held at three Centres during the year. These Classes are held on Saturday mornings.

(i.)	Norwich.	65 Teachers	..	1927.	50 Teachers.
(ii.)	Holt.	54 Teachers	...	(First Class at Holt).	
(iii.)	Loddon.	30 Teachers	...	1925.	20 Teachers.

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In addition to these, short Courses have been taken after school hours at the following places:—

(i.)	Sheringham.	5 to 6 p.m.	5 lessons.	20 members.
(ii.)	King's Lynn.	7 to 9 p.m.	5 „	25 „
(iii.)	Norwich.	(Sprowston School)	6 „	} 35 „
	„	(Hellesdon School)	5 „	

Lecture demonstrations were given and circulars were passed on to all members. For the year, every possible moment has been given up to these classes, and considerably more time than last year has been spent in the teaching of this subject.

PUPIL TEACHERS' CLASSES. Four Centres at Norwich, Melton Constable, Dereham and Downham Market have been visited monthly during this year. (12 lessons of 2 hours each.) The standard of work has reached a high level.

At Melton Constable it should be mentioned that through co-operation with the Central School, frequent use of the Playing Field has been possible. The Head Master has been extremely keen on this work, and games kit has been readily loaned for use in organised games. This arrangement is valuable—the major games teaching has been put on a satisfactory level and suitable matches have been arranged between the Central School and the Centre. The standard of play has improved in consequence.

(5) Organised Games.

The Playing Field accommodation has received much attention this year, and a greater number of Schools are able to carry out organised games under proper conditions.

CLASSES OF FIELDS.	(i.)	Supplied by the Committee.
	(ii.)	Local Grounds.
	(iii.)	Loaned by parents.
	(iv.)	Use of Recreation Grounds. Rental paid by Committee.

When visits are made to Schools, the size of the field is noted and a special circular has been supplied to each school giving a plan to suit conditions.

The games attempted this year are more varied in range, and suitable attention has been paid to minor quality training. The high standard of play attained in many of the girls' schools deserves special mention. The boys' schools in many cases spend too much time in match football.

CIRCULAR ON ORGANISED GAMES. (See Suggestions, 1927, Board of Education). Where organised games periods have been demonstrated, full use of the circular has been made; with time, an improvement will be made in the teaching of games.

PLAYGROUND GAMES. Team Play has been introduced to include the preliminary practice type of training, having a definite bearing on the games to be attempted in the weekly organised games period.

More effective coaching is required before a satisfactory level is reached in the fundamental play. Competition lessons are valuable, which include: throwing, catching, passing, running, dodging, marking, etc.

The periodic visits to playing fields have been valuable. The children are taught and coached by their own teachers under the supervision of the Organiser, and time in Teachers' Classes has been given up to this special side of training.

Teachers attending playing fields are expected to have a plan prepared by means of which they are able to keep all children occupied in a progressive manner. (See Secretary's remarks—Organised Games essentials).

The Committee's aid in the provision of games apparatus is appreciated—a definite advance will be possible in games teaching in consequence. Great care of the apparatus is desired. A games box has been made at several schools and a good arrangement for care has been observed. The older children are used for this task. 256 schools have allowed for apparatus on the Requisition Form R1., and have been supplied.

GAMES. (i.) Games need to be varied in range, and should include preliminary practices which have a definite bearing on those played during the weekly games period.

(ii.) It is commonly assumed that the games to be played in the Playing Field will be limited to the traditional forms of Football, Hockey and Cricket. Other games should be attempted which provide opportunities for all, taking up less space and graded to suit ages and ability of the players.

MINOR TEAM GAMES.

Designed to train as practice games.

MAJOR TEAM GAMES.

Taken in the organised games period as inter-team matches.

COACHING OF GAMES.

Hint 1. Fit the game to the type.

Hint 2. Pitches.

		Yards.	
Boys.	Football. ...	100 x 70	Main pitch.
		80 x 60	Medium pitch.
		65 x 40	Small pitch.
	Shinty. ...	60 x 40	
	Rugby touch		
	Hand ball. ...	50 x 35	
Girls.	Hockey. ...	90 x 55	Main pitch.
		80 x 50	Small pitch.
		Feet.	
	Net Ball. ...	100 x 50	
	Skittle and Post Ball. ...	100 x 75	
	Cricket. ...	Length of pitch 18 to 20 yards.	

GAMES.

Winter. Boys. Football, Rugby touch and pass, Handball, Skittle Ball, Post Ball, Hoop Ball, Line Ball.

Girls. Hockey, Shinty, Net Ball, Rugby touch or touch and pass, Handball, Hoop Ball, Hoop Rounders, Skittle Ball, Post Ball.

Summer. Boys and Girls. Cricket, Rounders, Stool Ball, Volley Ball.

PLAN OF PLAYING FIELD. A plan has been prepared showing how a pitch 90 x 60 yards can be used for :—

Games. Football, Hockey, Net Ball, Rugby touch, Post Ball, Skittle Ball, Hoop Ball, Hoop Rounders, Cricket, Circle Games.

Team Work. Net Ball—shooting practice, Long Jumping, Goal Shooting (Football and Hockey), Running (sprint, start and dash).

Copies may be obtained on application.

(6) Singing=Games and Folk Dancing.

Norfolk Festival, 1930.

Adjudicator's Remarks :—“The dancing was much more fresh and natural than it was in other parts of the country, but the knowledge of the dances was not nearly so great. If they kept their present freshness, teams would be coming to Norfolk from all over England to find out how Folk Dancing really should be done.”

Results.

(i.) SINGING-GAMES. (Infants.)

1st.	Shelton and Hardwick	...	86 marks.
2nd.	Runton	... ..	84 „
4th.	Cromer Girls	... ..	76 „

(ii.) JUNIORS. DANCING. (8—11 years.)

1st.	Hardingham	... ..	85 „
2nd.	Thetford Girls	... ..	83 „
	Stalham	... ..	83 „
3rd.	Runton	... ..	81 „

(iii.) SENIORS. DANCING. (11—14 years.)

1st.	Holt (Church)	... ..	85 „
2nd.	Shelton and Hardwick	... ..	84 „
3rd.	Sandringham	... ..	83 „
4th.	Runton	... ..	82 „

(iv.) MORRIS DANCING.

1st.	Thetford (Girls)	... ..	89 „
2nd.	Runton	... ..	87 „
3rd.	Swaffham (Girls)	... ..	80 „
4th.	Norwich P. T. Centre (Junior Team)	... ..	72 „

(v.) SWORD DANCING.

1st.	Thetford (Girls)	...	...	93	„
	Hingham (Boys)	...	...	93	„
2nd.	Runton	90	„
3rd.	Postwick	84	„

(vi.) PUPIL TEACHER CENTRES.

1st.	Norwich (Team A.)	...	80	„
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Highest Aggregate :—Runton 259 marks.

(7) Norfolk Teachers Gymnastic Association. (Commenced April, 1930).

Norwich—Branch No. 1.

The above Association has completed its second session of 12 weekly meetings.

There are now 40 members, and the weekly attendance has been excellent. This is all the more remarkable as many of the members have considerable distances to cover to get to the meeting place, "Sprowston School."

The Association has considerably developed the range of activities, and there is no doubt that the general improvement of Physical Education in the Schools of this area has largely resulted from the efforts of the members.

During the term the programme has included :—

- (i.) Physical Exercises drawn up by the Organiser for use in Elementary, Evening and Central Schools.
- (ii.) Competition training and Games.
- (iii.) Folk Dancing.

Weekly leaflets on these and other activities have been issued to the members.

During this Term a Net Ball section has been formed, and the games secretary appointed is busy arranging suitable matches.

(8) Evening Schools.

Good arrangements have been made for physical education in Evening Schools this year.

The following Centres have been formed :—

(i.)	Diss	...	40 members (women)	3rd year.
(ii.)	Fakenham	...	30 members (women)	2nd year.
(iii.)	Thetford	...	24 members (men)	1st year.
(iv.)	Wells	...	30 members (women)	1st year.
(v.)	N. Walsham	...	15 members (men)	2nd year.
			15 members (women)	2nd year.

The Secondary School Gymnasias are used at Fakenham, Thetford and North Walsham.

Dr. Ewing recently visited the Diss Centre and commented upon the excellent numbers and standard of the work attained.

A local Syllabus of Training has been used for these Classes and the Organiser is taking the Classes at Diss, Fakenham and Thetford this year.

PROGRAMME OF TRAINING INCLUDES :—

- (i.) Practical lessons (with and without apparatus).
- (ii.) Talks.
- (iii.) Games and Dancing.

DISS. Church Hall. Apparatus—Benches, Kit Bag containing :—
4 Footballs, Braid, Tennis Balls, Hoops, Ropes (Skipping type), Morris Bells and Sticks.

With a membership of 40, this is the most successful in the County this year.

FAKENHAM. Secondary School Gymnasia. (Full apparatus).

A very good standard of work has been attained at this Centre. Membership has reached 31.

THETFORD. Secondary School Gymnasia. (Full apparatus.)

The Men's Class has been a great success, starting with only 10 members, the total has now reached 24.

(9) **Swimming.**

There are no school baths in the County, but swimming instruction has been given at several Centres in the County.

HUNSTANTON. The Swimming Pool has been used this year. Both boys and girls received instruction, and a visit was paid to the Centre, when suitable arrangements for visiting the Pool were discussed.

NORTH WALSHAM. It is reported that a suitable spot is available for swimming, and a visit has been arranged for inspection for the coming season.

OTHER CENTRES TO VISIT. Caister (Great Yarmouth), Great Ryburgh, Aylsham, Cromer, Sheringham, Melton Constable.

This subject is under special observation and where possible suitable arrangements will be discussed with the Secretary this year.

Swimming may be regarded as a regular part of the Physical Training.

CENTRAL BATHS. These would be an economical venture and would accommodate 1,600 children per week in Classes of 40 each. Instruction would be possible under the School Teachers; this is considered a better method than instruction by a Bath Attendant, and would save the extra expense of special training.

Teachers' Classes would be held, where teaching would be put on a correct syllabus basis.

SCHEME OF CLASS TEACHING IN SWIMMING. Lessons of 30 minutes are usual. This includes the following:—

Free practice period	...	2	minutes.
Confidence practice	...	5	,,
Stroke practice	...	12	,,
More difficult methods	...	5	,,
Free practice	...	3	,,
Drying Down	...	3	,, (special supervision).

Swimming is one of the finest forms of exercise. It is in this training that the limbs and muscles receive systematic exercise, and in a way that they have a most beneficial effect on the vital organs. The contact with the water has its tonic effect upon the skin, and the movements are not impeded by clothing. It is essential that every child should have the opportunity to learn how to swim, for their own sake, and for the sake of their fellows.

OPEN-AIR EDUCATION.

There are no open-air schools, but teachers are encouraged to hold classes in the open air when the weather permits.

PROVISION OF MEALS.

No arrangements exist for the provision of meals under Sections 82-86 of the Education Act, 1921.

The teachers in many schools have continued the provision of "hot drinks" to which attention was drawn in the 1929 Report, and the good work being done quite voluntarily is worthy of commendation.

SCHOOL BATHS.

There are no school baths in the County.

NURSERY SCHOOLS.

No nursery schools have been established by the Authority.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

There has been no alteration in the methods of ascertainment, which were fully outlined in the last Report. All cases reported are seen by either the School Medical Officer or the Senior Assistant Medical Officer.

45 places are reserved for Norfolk children at the East Anglian School for Blind and Deaf Children, Gorleston. During 1930 one child was certified as blind within the meaning of the Education Act, 1921, and five as "deaf within." The former child was in addition an ineducable mental defective.

The following ineducable mental defectives were notified to the Local Control Authority during the year :—

	Male.	Female.	Total.
Idiots	4	4	8
Imbeciles	9	12	21
Imbeciles also Blind or Deaf	2	1	3
	<hr/>	<hr/>	<hr/>
	15	17	32
	<hr/>	<hr/>	<hr/>

Two cases of Epilepsy were during the year placed on the waiting list for admission to the Lingfield Epileptic Colony, but the demand for accommodation of such a nature is great and it is impossible to obtain vacancies except after long delay.

CO-OPERATION OF PARENTS.

The following percentages of parents accepted the invitation given to attend the routine medical inspections at the time of examination of their children :—

Entrants	73.84 per cent.
8 to 9	59.62 „
Leavers	37.29 „
Other age groups ...	37.71 „

CO-OPERATION OF TEACHERS, LOCAL CARE COMMITTEES, ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

Teachers continue to take great and appreciative interest in the work of Medical Inspection, and their co-operation with Local Care Committees is very valuable in securing treatment of defects.

The School Nurses are also School Attendance Officers.

24 cases were referred to the N.S.P.C.C., for attention during the year, 13 on account of general neglect and 11 for failure to obtain treatment. 2 of the cases of neglect resulted in successful prosecution, the parents being imprisoned and the children removed; the remaining 9 cases were kept under supervision and an improvement obtained.

As result of the efforts of the Society's Inspectors treatment was obtained in all cases referred.

EXCLUSION OF CHILDREN.
(Other than for Infectious Diseases).

2,735 children were excluded, or re-excluded, during 1930, as follows :—

Contagious Affections—

Impetigo	577	Ringworm—Cattle ...	7
Pediculosis	412	„ Body ...	10
Scabies	74	„ of Scalp (un-	
Conjunctivitis	440	til rules are complied	
		with)	19

Other Diseases (generally from Certificates issued by Family Doctor) —

Adenitis	...	...	17	Nervous Diseases	...	19
Anæmia	...	...	15	Otorrhœa	...	9
Debility (General)	...	...	73	Tonsillitis	...	97
Eczema	...	...	2	Tuberculosis — Pulmon-		
Epilepsy	...	...	3	ary*	...	2
Heart Disease	...	...	18	Tuberculosis — Non-Pul-		
Jaundice	...	...	62	monary	...	5
Lung Affection (not				Other Affections	...	756
tubercle)	...	...	118			

*These were both Suspected Cases.

233 Certificates were also issued to cover irregular attendance.

PERMANENT EXCLUSIONS.

23 children were permanently excluded from attendance at an Elementary School for the following reasons:—

Mental Deficiency	...	6	Incontinence of urine	...	1
Mental Deficiency and			Menorrhagia and Metrorr-		
Epilepsy	...	2	hagia	...	1
Epilepsy	...	4	Deaf “within”	...	1
Pulmonary and General			Asthma	...	3
Tuberculosis	...	1	Presence detrimental	...	1
Severe Heart Disease	...	2	Empyema and Dyspnoea		1

MISCELLANEOUS WORK.

485 swabbings of throats or noses in connection with control of infectious disease were taken and examined. 174 specimens of hair were examined for ringworm, of which 91 were positive. (These, of course, include re-examinations).

98 candidates for the teaching profession were examined and reported upon, as well as 10 supplementary teachers.

9 Health Lectures have been given by members of the Medical Staff.

SECONDARY SCHOOLS.

(Including Pupil Teacher Centres).

NUMBERS.

At the end of the year there were 10 Secondary Schools in the County, 4 being provided and 6 non-provided, as follows:—

Dereham Girls High	...	...	Provided.
Diss Secondary Mixed	...	...	„
Fakenham Secondary Mixed	...	...	„
King’s Lynn Girls High	...	...	Non-Provided.
King’s Lynn Grammar Boys	...	...	„
North Walsham Girls High	...	...	Provided.
North Walsham (Paston) Grammar Boys	...	...	Non-Provided.
Swaffham Grammar Boys	...	...	„
Thetford Grammar Boys	...	...	„
Thetford Grammar Girls	...	...	„

There were also 4 Pupil Teacher Centres, viz.:—at Dereham, Downham Market, Melton Constable and Norwich.

MEDICAL INSPECTION.

The following groups were inspected :—

- (i.) Pupils admitted to the school since the last Medical Inspection.
- (ii.) Pupils who were examined in the corresponding term of previous year.
- (iii.) Pupils leaving school permanently at the end of the term, and who were not inspected during the two preceding terms.

From Table I., page 42, it will be seen that 1,174 pupils underwent routine medical inspection, a further 27 being seen as “specials.” In addition, 851 pupils found defective at previous medical inspections were re-examined, making a total of 2,052 examined during the year.

A routine medical inspection was held each term at the Secondary Schools and once during the year at each Pupil Teacher Centre.

It has now been arranged in order to equalise the inspections each term to take Forms I. and II. during the Autumn Term, Forms III. and IV. during the Spring Term and Forms V. and VI., during the Summer Term. In addition defective pupils will be re-examined at each visit of the Assistant Medical Officer.

MEDICAL TREATMENT.

(1). Under Education Committee's Scheme.

			Refraction work.	Operations Ts. & As.
(a)	Vouchers Issued—			
	Specialists (Ophthalmic)	... ..	16	—
	General Practitioners	... ..	—	2
(b)	By whole-time Medical Officers	... ..	47	—

Of the 16 refraction cases examined by approved specialists, glasses were prescribed and obtained in 15 cases, while in 1 case, glasses were not found to be necessary.

Of the 47 pupils examined by retinoscopy by the whole-time Medical Officers, glasses were advised in 35 cases, and not found necessary in the remaining 12. Glasses were obtained by the end of the year in the former cases with one exception.

(2) Not under Scheme.

The following defects or diseases noted on routine medical inspection are known to have been treated during the year apart from the Committee's Scheme :—

Defect.	Referred previous to 1930.	Referred in 1930.
Anæmia	2	2
Heart	1	2
Spinal Curvature	—	3
Other Deformities	4	3
Underweight	1	5
Blepharitis	1	2
Corneal Ulcer	—	1
Other Diseases and Defects ...	—	2
	<hr/> 9	<hr/> 20

DENTAL TREATMENT.

7 Schools and 3 Pupil Teacher Centres were visited during the year, one of the latter receiving two visits, at the commencement and end of the year respectively.

Of the 1,044 pupils inspected, 589 were found to require treatment, and 386 actually received treatment.

INFECTIOUS DISEASES.

In contrast to the position in the Elementary Schools, the School Medical Officer does not advise re closure or exclusion of individual pupils in the event of any outbreak of infectious or contagious disease.

FOLLOWING UP.

As a general rule, treatment in the case of Secondary School pupils is obtained privately. In necessitous cases, however, assistance is given by the Education Committee in connection with tonsil and adenoid operations and defective vision.

Pupils found to require treatment are entered in the Medical Log Book of the School, but there are no Care Committees in existence, and the cases are not followed up by the School Nurses. The information given under Medical Treatment, Section (2), has been supplied by the respective Head Masters and Head Mistresses, who are most helpful in assisting in the work of Medical Inspection.

ELEMENTARY SCHOOLS

**TABLE I.—NUMBER OF CHILDREN INSPECTED 1st JANUARY,
1930, to 31st DECEMBER, 1930.**

A.—Routine Medical Inspections.

Number of Code Group Inspections—

Entrants	...	...	...	...	4710	
Intermediates	...	...	...	...	4847	
Leavers	...	...	...	...	3057	
TOTAL	...	...	...	...	<hr/>	12614
Number of other Routine Inspections	...	...	...	...	412	

B.—Other Inspections.

Number of Special Inspections	...	...	...	3307	
Number of Re-inspections	...	...	...	18586	
				<hr/>	22305
TOTAL	...	...	...	...	<hr/>
					34919

TABLE II.

A.—Return of Defects found by Medical Inspection in the Year ended
31st December, 1930.

Defect or Disease. (1)	Routine Inspections. No. of Defects.		Special Inspections. No. of Defects.	
	Requiring Treatment. (2)	Requiring to be kept under observation but not requiring Treat- ment. (3)	Requiring Treatment. (4)	Requiring to be kept under observation but not requiring Treat- ment. (5)
Malnutrition	457	68	16	7
Uncleanliness (See Table IV., Group V.)	278	9	6	...
Skin—				
Ringworm—				
Scalp	16	10	16	6
Body	7	3	8	...
Scabies	10	1	10	...
Impetigo	54	6	575	...
Other diseases (Non-Tuberculous) ...	63	41	190	4
Eye—				
Blepharitis	233	20	151	3
Conjunctivitis	22	11	36	4
Keratitis ... ..	...	2	...	1
Corneal Opacities	1	13	4	2
Defective Vision (excluding Squint) ...	398	731	119	72
Squint	95	145	35	17
Other Conditions	25	47	30	6
Ear—				
Defective Hearing	51	67	13	13
Otitis Media	38	42	59	7
Other Ear Diseases	40	22	30	8
Nose and Throat—				
Enlarged Tonsils only	476	1376	175	122
Adenoids only	69	233	31	53
Enlarged Tonsils and Adenoids ...	775	1184	171	121
Other Conditions	45	78	12	36
Enlarged Cervical Glands (Non-Tubercu- lous)	42	1189	48	59
Defective Speech	14	81	7	9
Heart and Circulation—				
Heart Disease:				
Organic	15	58	2	6
Functional	4	66	...	9
Anæmia	129	151	44	37

TABLE II.—Return of Defects—(continued).

Defect or Disease. (1)	Routine Inspections. No. of Defects.		Special Inspections. No. of Defects.	
	(2)	(3)	(4)	(5)
Lungs—				
Bronchitis	34	59	6	9
Other Non-Tuberculous Diseases ...	62	75	7	11
Tuberculosis—				
Pulmonary:				
Definite	5	6	...	2
Suspected	8	12	1	1
Non-Pulmonary:				
Glands	31	158	15	14
Spine	1	1	...	...
Hip ... ..	...	3	...	...
Other Bones and Joints	1	3	...	...
Skin	2	1	...	...
Other Forms	3	10	2	1
Nervous System—				
Epilepsy	3	18	1	1
Chorea	2	3	3	1
Other Conditions	8	30	3	8
Deformities—				
Rickets	17	120	...	3
Spinal Curvature	10	21	1	4
Other Forms	54	68	18	15
Other Defects and Diseases	310	598	759	98

B.—Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).

Group. (1)	Number of Children.		Percentage of Children found to require Treatment. (4)
	Inspected. (2)	Found to require Treatment. (3)	
CODE GROUPS:			
Entrants	4710	1090	23.14
Intermediates	4847	1297	26.76
Leavers	3057	649	21.23
TOTAL (Code Groups)	12614	3036	24.07
Other Routine Inspections	412	81	19.66

**TABLE III.—RETURN OF ALL EXCEPTIONAL CHILDREN
IN THE AREA IN 1930.**

			Boys.	Girls.	Total.
Blind (including partially blind)	(i) Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind ...	10	3	13
		Attending Public Elementary Schools ... ..	...	...	...
		At other Institutions ...	...	...	...
		At no School or Institution...	1	...	1
	(ii) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind ...	...	...	...
		Attending Public Elementary Schools	16	17	33
		At other Institutions ...	...	...	...
		At no School or Institution...	...	...	...
Deaf (including deaf and dumb and partially deaf)	(i) Suitable for training in a School or Class for the totally deaf or deaf & dumb.	Attending Certified Schools or Classes for the Deaf ...	7	17	24
		Attending Public Elementary Schools ... ..	...	...	...
		At other Institutions ...	...	...	...
		At no School or Institution...	1	1	2
	(ii) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ...	4	3	7
		Attending Public Elementary Schools	3	3	6
		At other Institutions ...	...	...	...
		At no School or Institution...	...	...	...
Mentally Defective.	Feeble-minded (cases not notifiable to the Local Control Authority)	Attending Certified Schools for Mentally Defective Children ... ..	...	...	...
		Attending Public Elementary Schools	86	47	133
		At other Institutions ...	2	4	6
		At no School or Institution...	45	25	70
Epileptics.	Suffering from severe Epilepsy.	Attending Certified Special Schools for Epileptics ...	...	...	...
		In Institutions other than Certified Special Schools ...	...	...	...
		Attending Public Elementary Schools	1	3	4
		At no School or Institution...	7	4	11*
	Suffering from Epilepsy which is not severe.	Attending Public Elementary Schools	20	17	37
		At no School or Institution...	1	1	2

TABLE III.—Numerical Return of all Exceptional Children—(continued).

			Boys.	Girls.	Total.
Physically Defective.	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ... ..	...	...	...
		At other Institutions ...	...	...	...
		At no School or Institution...	...	1	1
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	26	21	47
		At Certified Residential Open-Air Schools ... ..	...	...	..
		At Certified Day Open-air Schools ... ..	...	...	...
		At Public Elementary Schools	32	22	54
		At other Institutions ...	...	...	...
		At no School or Institution...	22	23	45
	Delicate children (<i>e.g.</i> pre or latent tuberculosis, malnutrition, debility, anaemia, etc.)	At Certified Residential Open-air Schools (Sanatorium School) ... ..	...	...	...
		At Certified Day Open-air Schools ... ..	...	...	...
		At Public Elementary Schools	155	149	304
		At other Institutions ...	2	2	4
		At no School or Institution...	15	17	32
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	7	5	12
		At Public Elementary Schools	2	2	4
		At other Institutions ...	6	5	11
		At no School or Institution...	3	...	3
	Crippled children (other than those with active tuberculous disease), <i>e.g.</i> , children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools	1	7	8
		At Certified Residential Cripple Schools ... ..	...	...	...
		At Certified Day Cripple Schools ... ..	...	...	...
		At other Institutions ...	3	1	4
		At Public Elementary Schools	157	118	275
		At no School or Institution...	87	74	161*

*Includes children between 14 and 16 years of age

TABLE IV.—RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1930.

Group I.—Minor Ailments (excluding uncleanliness, for which see Group V.)

Defect or Disease.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme*.	Otherwise.	Total.
(1)	(2)	(3)	(4)
Skin—			
Ringworm—Scalp	198	...	198
Ringworm—Body	46	...	46
Scabies	30	...	30
Impetigo	1302	...	1302
Other Skin Disease	254	...	254
Minor Eye Defects (External and other, but excluding cases falling in Group II.)	745	...	745
Minor Ear Defects	173	...	173
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, etc.)	1322	...	1322
TOTAL	4070	...	4070

*Includes children treated in School and at home by the School Nurses, the treatment being continued by the children's parents between the visits of the Nurse.

TABLE IV.—Return of Defects—(continued).

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.)

Defect or Disease.	Number of Defects dealt with.			
	Under the Authority's Scheme.	Submitted to refraction by Private Practitioner or at Hospital, apart from the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including Squint). (Operations for squint should be recorded separately in the body of the Report)	1048	62	...	1110
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ...	...	...	...	...
TOTAL ...	1048	62	...	1110

Total number of children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme	...	...	...	840
(b) Otherwise	...	...	...	62

Total number of children who obtained or received spectacles:—

(a) Under the Authority's Scheme	...	...	...	774
(b) Otherwise	...	...	...	60

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.				Total Number Treated.
Received Operative Treatment.			Received other Forms of Treatment.	
Under Local Education Authority's Scheme-Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
(1)	(2)	(3)	(4)	(5)
800	181	981	110	1091
Total 800	181	981	110	1091

TABLE IV.—Return of Defects—(continued).

Group IV.—Dental Defects.

Period—January 1st to December 31st, 1930.

1. Number of Children who were

(a) Inspected by Dentists—

Routine Age Groups.

Age Groups.														
3	4	5	6	7	8	9	10	11	12	13	14	Specials	Total	
50	411	1733	3079	3518	3606	3884	4465	3076	2704	2458	2327	30	31341	
(b) Referred for Treatment							...	...	...					18808
(c) Actually Treated							...	...	...					13007
(d) Re-treated*					...	...	...	...						4394

*Included in (c).

2. Particulars of Time given and of Operations undertaken:—

(a)	Number of half-days devoted to Inspection...	481	
(b)	Number of half-days devoted to Treatment...	1717	
	Total ...	—	2198
(c)	Total number of attendances made by Children		14290
(d)	Fillings—Permanent Teeth ...	4443	
	„ Temporary ...	331	
	Total ...	—	4774
(e)	Extractions—Permanent Teeth ...	1240	
	„ Temporary Teeth ...	17512	
	Total ...	—	18752
(f)	Number of administrations of General Anæsthetics for extractions ...		1
(g)	Number of other Operations—Permanent Teeth	8105	
	„ „ „ Temporary Teeth	9396	
	Total ...	—	17501

Group V.—Uncleanliness and Verminous Conditions.

(i)	Average number of Visits per School made during the year by the School Nurses ...	7.54
(ii)	Total number of Examinations of Children in the Schools by School Nurses ...	184653
(iii)	Number of individual children found unclean ...	4408
(iv)	Number of children cleansed under arrangements made by the Local Education Authority ...	Nil.
(v)	Number of cases in which legal proceedings were taken:	
	(a) Under the Education Act, 1921 ...	Nil.
	(b) Under School Attendance Bye-laws ...	13

SECONDARY SCHOOLS.

(Including Pupil Teacher Centres).

**TABLE I.—RETURN OF MEDICAL INSPECTIONS 1st JANUARY,
1930, to 31st DECEMBER, 1930.**

A.—Routine Medical Inspections.

Number of Code Group Inspections—

Entrants	...	...	...	...	391	
Yearly Examinations		...	...	...	767	
Leavers	...	...	...	...	7	
TOTAL	...	...	...	...	—	1165

Number of other Routine Inspections ... 9

B.—Other Inspections.

Number of Special Inspections	...	...	...	27	
Number of Re-inspections	...	...	...	851	
				—	887
TOTAL	...	...	...	...	2052

SECONDARY SCHOOLS.

(Including Pupil Teacher Centres).

TABLE II.

**A.—Return of Defects found by Medical Inspection in the Year ended
31st December, 1930.**

Defect or Disease.	Routine Inspections. No. of Defects.		Special Inspections. No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation but not requiring Treat- ment	Requiring Treatment.	Requiring to be kept under observation but not requiring Treat- ment.
(1)	(2)	(3)	(4)	(5)
Malnutrition	12	6	...	...
Uncleanliness	2	1	...	...
Skin :—				
Impetigo	1	...	...	...
Other diseases (Non-Tuberculous) ...	4	...	1	...
Eye—				
Blepharitis	6	1	...	...
Conjunctivitis	1	...	...	...
Defective Vision (excluding Squint) ...	37	62	3	1
Squint	1	1	1	...
Other Conditions	2	4	...	...
Ear—				
Defective Hearing	4	2	...	...
Otitis Media ... ..	...	1	...	...
Other Ear Diseases	1	...	...	...
Nose and Throat—				
Enlarged Tonsils only	19	35	1	...
Adenoids only	3	1	...	...
Enlarged Tonsils and Adenoids ...	8	10	1	...
Other Conditions	8	4	1	...
Enlarged Cervical Glands (Non-Tubercu- lous)	1	10	...	...
Defective Speech ... ..	...	...	...	...
Heart and Circulation—				
Heart Disease :				
Organic ... ..	...	2	...	...
Functional	2	4	...	2
Anæmia	4	5	...	1

TABLE II.—Return of Defects—(continued).

Defect or Disease. (1)	Routine Inspections. No. of Defects.		Special Inspections. No. of Defects.	
	(2)	(3)	(4)	(5)
Lungs—				
Bronchitis ... ..	...	...	...	...
Other Non-Tuberculous Diseases ...	1	...	...	...
Tuberculosis—				
Pulmonary:				
Definite ... ..	...	...	...	...
Suspected ... ..	...	...	...	...
Non-Pulmonary:	...	...	...	...
Glands ... ..	...	...	...	...
Spine ... ..	...	...	...	...
Hip ... ..	...	...	...	...
Other Bones and Joints ...	...	...	...	...
Skin ... ..	...	...	...	...
Other Forms ... ..	...	...	...	...
Nervous System—				
Epilepsy ... ..	...	...	...	...
Chorea ... ..	...	...	...	...
Other Conditions	2	1	...	...
Deformities—				
Rickets ... ..	...	...	...	...
Spinal Curvature	3	...	...	1
Other Forms	11	7	1	...
Other Defects and Diseases	53	26	...	1

B.—Number of Individual Pupils found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness and Dental Diseases).

Group (1)	Number of Children.		Percentage of Children found to require Treatment. (4)
	Inspected. (2)	Found to require Treatment. (3)	
CODE GROUPS:			
Entrants	391	64	16.37
Yearly Examinations	767	99	12.91
Leavers	7	3	42.86
TOTAL (Code Groups)	1165	166	14.25
Other Routine Inspections	9	3	33.33

SECONDARY SCHOOLS.

(Including Pupil Teacher Centres).

**TABLE IV.—RETURN OF DEFECTS TREATED DURING THE
YEAR ENDED 31st DECEMBER, 1930.**

Group II.—Defective Vision and Squint.

Defect or Disease.	Number of Defects dealt with.			
	Under the Authority's Scheme.	Submitted to refraction by Private Practitioner or at Hospital apart from the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including Squint but not Operations)	63	33	...	96
Other Defect or Disease of the Eyes ... ..	...	...	...	...
TOTAL	63	33	...	96

Total number of pupils for whom spectacles were prescribed:—

(a) Under the Authority's Scheme	...	...	...	50
(b) Otherwise	...	...	...	34

Total number of pupils who obtained or received spectacles:—

(a) Under the Authority's Scheme	...	...	...	47
(b) Otherwise	...	...	...	36

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.				
Received Operative Treatment.			Received other Forms of Treatment.	Total Number Treated.
Under Local Education Authority's Scheme—Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
(1)	(2)	(3)	(4)	(5)
2	12	14	...	14
TOTAL	12	14	...	14

SECONDARY SCHOOLS.

(Including Pupil Teacher Centres).

TABLE IV.—Return of Defects—(continued).

Group IV.—Dental Defects.

Period—January 1st to December 31st, 1930.

1. Number of Pupils who were

(a) Inspected by Dentists—

Routine Age Groups.							Specials	Total.
Under 12	12	13	14	15	16	over 16		
67	107	158	202	216	162	131	1	1044
(b) Referred for Treatment ...								589
(c) Actually Treated ...								386
(d) Re-treated* ...								138

*Included in (c).

2. Particulars of Time given and of Operations undertaken:—

(a)	Number of half-days devoted to Inspection...	16	
(b)	Number of half-days devoted to Treatment...	124	
	Total ...	—	140
(c)	Total number of attendances made by Pupils		823
(d)	Fillings—Permanent Teeth ...	837	
	„ Temporary ...	...
	Total ...	—	837
(e)	Extractions—Permanent Teeth ...	105	
	„ Temporary Teeth ...	53	
	Total ...	—	158
(f)	Number of administrations of General Anæsthetics for extractions ...		Nil.
(g)	Number of other Operations—		
	Permanent Teeth ...	1150	
	Temporary Teeth ...	12	
	Total ...	—	1162

